

Stanton Police Department Application Procedures

Applicants must complete and return all application and background forms to the City of Stanton on or before any return date listed in the advertisement. This job application must be submitted, a resume only is not sufficient.

With this initial application (attached), at a minimum you must provide copies of the following documents:

- High School Diploma (or G.E.D. certificate)
- College Transcript
- Military Discharge (DD214)
- Birth Certificate
- Recent photograph (head & shoulders) to assist with background investigation

These documents will not be returned. Do not send originals.

Your application must be received on or before any return date listed in advertisement.

Those applicants who appear qualified may receive additional materials and forms that must be completed and returned to complete the application process.

Those applicants who appear best suited for the position will be subject to an extensive background investigation, criminal history checks, written examinations, physical agility testing, oral examinations, and psychological examinations during the hiring process.

Applicants who provide an incomplete application, fail to provide requested information, who provide misleading or false information, or submit information after the specified deadline(s) will be removed from further consideration for employment.

Those applicants passing all of these examinations, tests, and checks may be subject to drug testing, psychological examination(s), and/ or polygraph examination. The City may require the candidate to submit to a physical examination by the City's physician, based on direct threat considerations.

Your application will remain on file for a period of one (1) year after the date of the application. This pool of applications may be utilized during this period to fill any openings during that time period. The fact that you were not selected for any immediate openings does not necessarily mean that you will not be considered for other openings that arise during this one year period.

The City of Stanton is an Equal Opportunity Employer.

STANTON POLICE DEPARTMENT BACKGROUND INFORMATION FOR FMPI OYMENT

INSTRUCTIONS

Use a black ballpoint pen to complete this application. Do not use a typewriter. Answer each question clearly and completely. All questions must be answered. If a section or question does not apply to you, write "NA" to that question or section. The failure to provide information requested during any part of the application or hiring process will result in your application being withdrawn from further consideration for employment. Be as specific as possible, since your application will be screened on what you include regardless of what you might otherwise be able to perform.

This is the background packet for employment, and no employment contract is being offered. If you need additional space to respond, attach a separate piece of paper, noting the question/section and the additional information.

If you need assistance in completing these forms, you may ask the city clerk for help. The City of Stanton does not discriminate on the basis of race, color, religion, sex, gender, national origin, age, familial or veteran status, political affiliation, disability status, or any other legally protected status.

Warning!:

All information in this packet will remain confidential, and will be only released as necessary to evaluate your application. However, it will be subject to an extensive background examination and polygraph. Any false, misleading, or incomplete statements will be considered grounds for rejection, or dismissal.

Leave no section blank. If you are selected for employment, this background application packet will become a part of your personnel file.

GENERAL INFORMATION

LAST NAME	FIRST		MI	IDDLE	
MAILING ADDRESS:					
CITY:	_ STATE:	ZIP	·:		
SOCIAL SECURITY NUMBER:	[D.O.B:			
DRIVER'S LICENSE NUMBER:		STATE:			
CELL PHONE: ()	OTHER PHO	NE: ()			
EMAIL ADDRESS:					
you do not indicate an email address, all co	ence from the Stanton Police Department orrespondence will be sent via US mail to the sent known by:ers you have used:	he address yo	ou lis	sted above)	
Date of application:	Date availabl	e for work:			
Check the appro	priate box for each question			Yes	No
evening, nighttime, weekends and ho	shift work. This includes working during blidays. Are you available to work shift must be at least 21 years of age. Are you are applying for?	work?			
	n motor vehicle. Do you have a current	valid			
Has your driver's license ever been s denied?	uspended, revoked, canceled, or other	wise			
-	lony in this state, or any other state?				
	e in the capacity for which you are app				
Are you certified as a police officer in	this, or any other state? If yes, indica	te state:			
Have you ever worked for this City? If yes, list name(s) used and o	lates:	[]Yes	[]No	
	or any member of the City Council?	[]Yes	[]No	-
Have you applied to this Police Depart		[]Yes]No	
If yes, list name(s) used and c	lates:				

DRIVING HISTORY

CRIMINAL HISTORY

our driver's licer	driver's license number: Issu			ng State:				
	List all traffic tio	kets you have rec	ceived in the last 5 y	years.				
Date	Cha	arge	City/County/State		Disposition			
o you have liabi	ity insurance on the v	ehicles you opera	te?	[]	Yes []No			
ave you ever ha	d your insurance polic	y canceled?		[]	Yes []No			
st below all traf	ic accidents you have	been involved in	, regardless of fault	, in the la	st 5 years:			
Date	Location	(city, county, sta	te)	Cau	se of accident			

Since age 18, ha	ve you eve	er been arrested?		[]Yes	[]No
If yes, complete	the follow	ing:			
Date		Charge	County	Di	sposition
essential job function Remember, the City job without substan	ons or demor conducts a patial risk or ha	ckground investigation, it appea nstrate performance in the exam ore-employment exam, which w arm to yourself and/or the public	ination process, the parti ill determine whether you c.	es will explore thes u can do the essent	e alternatives. ial functions of the
		ck mark in the appropriat	e box	Yes	No
Are you a Unite		ble to work in the United S	tates?		
		uired upon employment, and failure		ion will be cause for s	eparation)
Have you applie	d with any	other police department i	in the last 5 years?	[]Yes	[]No
If yes, list:					
Date		Department	City		State
	1				

	e drugs as necessary for medical procedures, and under the be excluded when considering your answer:	superv	ision of	a me	dical
Have yo derivat	ou ever used illegal drugs, to include meth, PCP, marijuana, hives?	neroin, [crack, c]Yes		e, or their No
	ou ever sniffed glue, paint, lacquer, gasoline, or any other su "high"?	bstance [e with tl]Yes		ent of No
Have yo	ou used any of the above substances within the last 6 month	ns? []Yes	[]	No
Have you ever l	oeen fingerprinted?	[]Yes	[]	No
If yes, complete	2:				
Date	By whom(agency)		Pur	pose	
Has your spous	e ever been arrested since age 18? If so, list:				
Date	Reason arrested		Count	y/Sta	te
		_	_		

RESIDENCES

List each and every place you have resided in the past 10 years. Start with current residence. Provide as much information as possible.

From	То	Address	City	State	Landlord name/phone

List all Colleges, Universities that you have attended.

College	City/State	Major	Minor	Degree earned/hours

List the High School(s) you attended

School name	City, State		Grade o	completed
Do you have a high school diploma,	or G.E.D.?	[]Yes []No
Have you ever been expelled or sus scholastic standing?	pended from any school, dropped out, or wi	ithdr [rawn beca]Yes [use of poor]No
If yes, explain:				

EMPLOYMENT HISTORY

Starting with your current, or most recent, employer, list all jobs you have held for the last 10 years.

From	То	Employer Name and Address	City/State	Phone	Type of duties & Reason for leaving

If you have no prior law enforcement experience, explain what actions you have	tak	ken tha	t yc	u feel help
qualify you for this position:				
Have you ever been fired, suspended, or put on inactive status (other than for p	rior	worke	ers	
compensation cases) by any of your previous employers?	[]Yes	[]No
If yes, specify which employer and circumstances:				
Do you have any special licenses, training, or volunteer experience that would h	elp	us det	erm	ine your
suitability for this position? If so, list:				

If you are a KLEC	certified officer, provide class num	nber and date of graduation:	
List any military e	xperience you may have:		
Dates	Service Branch & Highest Rank	Duties	Type of discharge
Have you in the la officer? If yes, complete:	ast 10 years been engaged in any l	business as an owner, partnei	(active or silent), or
Dates	Business Name and State	Nature of Business	Your association

This question deals with subversive organizations. For this purpose, subversive organizations shall mean any group or organization which does not support local, State, and Federal Laws, and which advances it's beliefs through violence and/or force.

Have you advocated, advised, or taught the doctrine that the governme	nt o	f the U	nite	d States of	
America or any state or political subdivision thereof should be overthrow	wn l	by force	e, vi	olence, or	
any unlawful means?	[]Yes	[]No	
Are you now, or have you ever been a member of, any subversive organization?					
[]Yes []No					
Have you ever been connected, or affiliated in any manner with, or have	yo	u ever a	atte	nded	
meetings of any subversive organizations?	[]Yes	[]No	
Have you ever paid, collected, or solicited any money, dues, or contribut	ion	s to, fo	r or	on behalf	
of any subversive organization?	[]Yes	[]No	
If any response to a question in this section is "yes", attach a statement	to tl	his app	licat	ion	
indicating the circumstances.					

List any outstanding loans that you are the signer, or co-signer of? (You will be required to provide a credit report later in the process if selected to move on)

Lender	Original loan amour	nt Current status
	elinquent on an outstanding loan, o	credit card, or other credit

The following question seeks background references to determine past character.

Do not list family members or former employers. Provide at least 5 references. If you so desire, you may provide more references on an additional sheet of paper.

Name	Address	City, State,Zip	# years known	Phone number

Provide the following information about yourself:

Spouse name	Address	Phone Number	# years married
_			
Former spouse name	Address	Phone Number	Year divorced
		,	
Children's name(s)	Address	Age	School

Sibling name(s)	Address	Age	Phone Number (if
			adult)
Father's name	Address	City/State	Phone Number
Mother's maiden name	Address	City/State	Phone Number
			1

Which of your previous jobs did you like best, and why?	
Which of your previous jobs did you least like, and why?	

f yes, complete:		
i yes, complete.		
Date	City/County/State	Type of Summons or Subpoena
his application, it may be		ny information that was asked for in
employment, it may be ca	e cause for the rejection of your applications ause for the termination of your employred or mental ability to do the job).	on, or if you are accepted for
employment, it may be ca	e cause for the rejection of your applications ause for the termination of your employr	on, or if you are accepted for
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Have you ever stolen anything of value?	[]Yes	[]No
If your answer is yes, please indicate when, what it was, your age at the and how often it happened.	tim	e, the	circ	umstances

STATEMENT OF TRUTHFULNESS AND PERMISSION TO INVESTIGATE

(to be signed in the presence of a Notary Public)

READ CAREFULLY BEFORE SIGNING!

I certify that I am the person named above and within this application, and that the facts and information given within this application are true and complete to the best of my knowledge. In signing this statement I do so with the understanding that the truthfulness of all statements herein will be investigated and if any are found incorrect, incomplete, or misleading, may render me ineligible for employment with the City of Stanton. I hereby grant permission to the City of Stanton to investigate any information contained in this application. I understand that this application is not a contract of employment. I hereby release the City of Stanton and its agents from all liability in making any investigation and inquiry relative to information contained in the application forms. I understand that if employed, false or misleading statements given in this application or interview(s), or the failure to provide or document the requested information, may result in discharge of employment. I understand that I am required to abide by all rules, regulations, and policies of the City of Stanton if I am accepted for employment and that if so accepted I will serve a probationary period of at least twelve (12) months.

I hereby authorize any City, County, State, Federal Agency, or former employer or any individual listed in this application form to furnish to any officer of the City of Stanton Police Department any information concerning me necessary to process this application. A copy and/or facsimile copy of this authorization shall be considered as valid as the original.

I agree to submit to a pre-employment drug screen and a post offer medical examination if requested.

Date:	Signature: _	
Subscribed and sworn to by		, before me, a Notary Public, this
day of		, 2
	Notary Public	(seal)
My commission expires:		

AUTHORIZATION TO RELEASE INFORMATION

To Whom It May Concern:

I hereby authorize any sworn Police Officer or other authorized representative of the City of Stanton Police Department bearing this release, or a copy thereof, within six (6) months of its date, to obtain information from your files pertaining to my employment, credit, financial status, credit history, or educational records, including but not limited to credit history, academics, achievements, attendance, athletics, personal (non-medical) history, employment history, financial payments and obligations, and disciplinary records. I hereby direct you to release such information upon request of the bearer.

This release is executed with full knowledge and understanding that the information is for the official use of the Stanton Police Department. Consent is granted for the Stanton Police Department to furnish such information as is described above, as third parties, in the course of fulfilling its official responsibilities.

I hereby release you as the custodian of such records, and any school, college, university, or other educational institution, credit bureau, lending institutions, consumer reporting agency, or retail business establishment including its officers, employees, or related personnel both individually and collectively, from any and all liability for damages of whatever kind which may at any time result to me, my heirs, family or associates because of compliance with this authorization and request to release information, or any attempt to comply with it.

I hereby acknowledge that information obtained in the background investigation is confidential and will not be released to the applicant. I acknowledge that this is important in order to obtain objective and unbiased information. I will not attempt to obtain from the City of Stanton a copy of any background information obtained by the City of Stanton. A copy of this authority to release will be as valid as the original. Should there be any question as to the validity of this release, you may contact me as indicated below.

Date:	Signature:	
Printed full name:		
Current address:		
Phone number: ()		
Subscribed and sworn to before me	, a Notary Public, this	
day of		
	Notary Public	(seal)
My commission expires:		

CITY OF STANTON POLICE DEPARTMENT CONFIDENTIAL INFORMATION AGREEMENT FORM

A thorough investigation will be conducted to determine your qualifications for the position for which you have applied. To a great extent, your ability to be qualified for employment will depend on information obtained on this application, and in confidential interviews with persons with whom you have been associated, including the personal references and relatives you have listed in the application, as well as other persons.

If the reason(s) for your non-acceptance are of a temporary nature, whereby you could be accepted at a later date, you will be so notified. Failure to be certified and hired at the present time does not indicate that you cannot re-apply at a later date, but that other candidates provided experience, education, and background data that appeared more suitable for employment.

By completing and returning this initial application you have completed one step in the process of applying for employment with the City of Stanton Police Department. If your initial application is suitable, you may receive additional materials that must be completed and returned within a deadline period for those materials, and failure to complete and return any such materials, providing insufficient or misleading information, or failure to submit to, or appear for, further testing and evaluations will result in your application being withdrawn from further consideration.

I HAVE READ AND FULLY UNDERSTAND THE ABOVE STATEMENT

Stanton, KY 40380

Date: Signature:
Once you have completed the application, and have verified your answers, this application, along with the required documents, should be submitted immediately to:
MAIL:
City of Stanton
PO Box 370
Stanton, KY 40380
DELIVERED:
98 Court Street